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HOW ARE YOU FEELING NOW?

Edwin L. Sabin



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HOW ARE YOU FEELING NOW?



“Oh, no. I’m not near the nerve—yet.”

FRONTISPIECE. *See page 20*

HOW ARE YOU FEELING NOW?

BY
EDWIN L. SABIN

WITH ILLUSTRATIONS BY
TONY SARG



BOSTON
LITTLE, BROWN, AND COMPANY
1918

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Published, September, 1917

THE UNIVERSITY PRESS, CAMBRIDGE, U. S. A.

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DEDICATED
WITH MUCH SYMPATHY
BY
MAN-OF-THE-HOUSE
TO THE
LADY-WHO-MARRIED-ME

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How Are You Feeling Now?

CHAPTER I IN EXPLANATION

IN setting down these memoirs I have not the slightest shame, because after a human being has lived for a few decades there is little in his physical make-up which has not been exposed to view. His repairs are a part of the records of the dentist, the doctor, the hospital, his family and numerous interested friends, and a certain element of adventure attaches to him as a veteran on life's battle-front.

Very few persons there are, not open to the fascination of their own or others' symptoms and the discussion of the experiences resulting; and if by my relation I may add to the sum total of information upon what may occur outside when something has happened inside (speaking anatomically), I feel as though I ought to act

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pro bono publico regardless of a natural shyness.

The ills to which this mortal frame is heir are of very great importance, not only because without pain we would not know that anything was the matter with us, but also because they constitute a medium of social intercourse current everywhere. While I may be accused of a frivolous attitude toward such serious institutions as the dentist's chair and the operating table and the physician's prescription and the intestinal tract, believe me, I am not one who jests at scars that never felt a wound.

The following pages will demonstrate that nobody but I has gone through what I have gone through — although I don't anticipate that the fact will be publicly admitted by numerous invidious rivals bent upon exploiting their own minor casualties. The trouble is, that when we come to the topic of teeth, stomachs, and operations, most of us want to do the talking and few of us are willing to do the listening.

That is where the dentist has the advantage; he may talk all he pleases. And as

IN EXPLANATION

I am going to see him, presently, again, I seize upon the opportunity to sandwich in my say-so, first, while at the same time discountenancing, for the moment, the above-mentioned zealous rivals.

CHAPTER II

IN THE ORCHESTRA CIRCLE

ANOTHER one of my teeth in the orchestra circle had begun to act suspiciously. At first I ignored it. That is, I ostensibly ignored it, only tentatively allowing it the luxurious twinge from hot coffee and cold water, and in a very unobtrusive manner querying it with my tongue. Now, if one only could keep one's tongue away, one might, I daresay, be successful in the mental treatment of a tooth. But those stolen visits are as sweet as stolen fruit — and by rubbing hard with my tongue, and sort of sucking at the same time, I could tease that tooth awfully.

In equally surreptitious fashion I could stick it with a toothpick and at sudden moments obtain a most delicious, even while alarming, writhe. As I am a brave man, I persistently showed that tooth I was not afraid of it, and was not bulldozed by it.

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If it wanted to act up, temporarily, let it act.

The observant Lady-Who-Married-Me saw my tongue-work, and abruptly demanded, out of that embarrassing perspicuity for which such ladies are notorious:

“What’s the matter? Does your tooth hurt?”

“Oh, just a little sensitive, is all. Think I must have caught cold in it.”

“You’d better go to the dentist, had n’t you, before it gets worse?”

“Maybe I will,” I replied lightly and with the reservation which springs from hope and a naturally buoyant disposition. “I’ll wait a little, first.” *I always do.*

But a tooth never recovers of itself. About a tooth there is nothing self-healing. That I have demonstrated. You can cut your finger clear to the bone, and then tie it up in a rag and answer questions about it, and it gets well. You can sprain your ankle, and by humoring it a little *it* gets well. You even can have an inflamed appendix, and if you lie on your back with a leg up high enough and long enough, it (the appendix, not the unfortunate leg)

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gets well. That is, if you're too poor to have it extracted. But a tooth seems to be the most helpless, unresourceful member of the human anatomy.

The den of our dentist is located in a dentists' and doctors' heaven downtown, where the elevators are most disconcertingly rapid. My idea is that elevators in such a place should be slow — say regular English "lifts" — so as to allow anybody who changes his mind to step out. But I have observed that the elevators in these "professional" office buildings are the fastest made, and I have long suspected that the elevator tenders are really trained keepers — guards, you know. In this type of office building there are no stairs; or if there are stairs, the janitor is always barring the way with a mop. So, you see, escape is cut off, unless one commits justifiable homicide by jumping out of a window, or off the roof.

The elevator was full of the customary desperate souls, on every face the cast of grim, sad determination.

Three of us were deposited on Floor

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Six: one disappeared without a sound in the maw of Eye, Ear, Nose and Throat; another wended a little way with me, and was engulfed in Dental Surgery; I proceeded alone past Diseases of the Chest, past Drs. Brown and Brown, past R. H. Peck, M.D., J. B. Cheseman, M.D., Q. D. Oates, M.D., Horatio Bridges, D.D.S. (a horrifying array, this, all behind one door), past Henry Jones, Oral Surgeon, past P.S. Rector, Orthodontist, past Robert Judson, Anæsthetist, past two more M.D.'s and another D.D.S., past an M.D. and a D.D.S. closeted together, past a Diseases of the Stomach, and thus have advanced by successive steps to Antechamber 622. I firmly grasp the knob, clammy with the moisture from many previous perspiring palms, and cross the Threshold of Sighs.

Dentists' dens are arranged according to the one formula: There is this antechamber, the Room of Palpitation; a middle room, the Room of Devastation; and a secret third room, beyond, the Room of Exultation. The whole is the suite of Concatenation.

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Usually the antechamber is occupied all day, and no doubt all night, by a circle of dumb waiters, who receive each newcomer with the sad, steadfast scrutiny of utmost compassion. The chairs are occupied only on their edges, and while some persons are determinedly reading magazines such as the beautiful "Dental Digest" and the "Alveolar Record," or a last year's copy of "Punch," you may see that they are not deeply interested. If there is a man with his face tied up, he is the center of attraction.

I never knew a fair face conceal so hard an interior as that of the young woman who promptly appears and registers each arrival in her Book of Doom. She has a businesslike manner which precludes any appeal to sympathy. I presume that outside of the building she regains her feminine attributes, and would rescue a homeless kitten as quick as any other woman. But in the antechamber and in the operating-room I never yet have had one tender expression from her. She is adamant. I hope she sleeps well, but I doubt it.

When a fellow is in a hurry with a tooth,

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the antechamber is always full. When a fellow is not in a hurry, the antechamber is always empty. I was not in a hurry; I never am when I arrive. My tooth was wholly normal; I could have chewed an iceberg without a particle of discomfort. Inasmuch as I was not in a hurry — not one particle in a hurry — the antechamber proved empty of everyone save a stern woman with a shrinking, wide-eyed child, and before I had a chance to turn around and retreat, the young woman before mentioned advanced aggressively upon me with her book, the roll of the world's heroes and heroines.

The conversation is conducted along well-established lines.

“Is the doctor in?”

Of course, he always is. However, one always has the hope that he is n't. And if he is n't —

“I'll see,” informs the young lady, as a mere matter of words. And she leaves me to comradeship of the stern mother and the subduedly-staring child.

From the middle chamber wells a mur-

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mur, and a weak "All right, Doctor. Tuesday afternoon. Good-day"; and then emerges through the doorway a large man with his mouth still awry, and his eyes glassy and moist. He hastily seizes his hat, evades our querying survey, and totters forth, his steps sounding brisker as he recedes down the echoing corridor.

The young woman beckons to the stern mother, who leads in the helpless child; and to me she (the young woman) warns, implacably:

"The doctor will see you in a moment."

Then when she withdraws she leaves the door ajar, so as to make sure of my movements.

The mother and child are detained only briefly. With me in prospect the case evidently is not interesting and can be postponed. Anyway, my dentist dismisses the child case with alacrity; the twain hasten out, and he appears in the doorway, smiling expectantly and rubbing his hands.

"Now for you," he challenges — or words to that effect.

My back is to the wall. I am a man

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who won't have his eyes bandaged for the firing squad, and I speak right up.

"How are you, Doctor? I have a tooth that seems to bother me a bit — nothing especial, you know — just a little sensitive; think I must have caught a little cold in it; but you might look at it, if you will. I don't think it will amount to anything."

"Take the chair," he invites.

The young woman is busy effacing the traces of recent assaults, preparing the uneasy bed for *me*. She whisks a fresh napkin for my head, and with the sangfroid of her training gathers the well-worn instruments for repairs. I take the chair — or, rather, the chair takes me. The arms contract, to hold me fast; the dentist deftly presses a spring, and back I am tilted until I cannot possibly get up without help. That help, of course, I shall not be granted, until he is good and through with me. Why in thunder was I so weak as to come, anyway!

"Ah — let's look into it and see what's the trouble," murmurs the dentist; and I open up. It is too late to resist, now.

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The young woman hovers near; I observe her with the corner of one eye, and I'd like to tell her that she'd better go about her business. But the dentist, an eager smile on his deceitful face, obscures me with his white coat, while he poises the cruel little pick that he has selected from his tinkling hoard. His finger enters my mouth, and holds down the lower jaw.

It is the dream of my life sometime to bite a dentist's white finger squarely off. What joy! However, I never have. I wonder what would happen if I did. I suppose he'd grow another; dentists must, for no doubt there are spirits less meek than mine, and yet I never saw a three-fingered dentist. On the contrary, they are more apt to be six-fingered, and all fingers inside one's mouth when the moment is interesting.

"Which tooth is it?" asks my dentist.

"'Hird back fum middle right shide, bottom," I hazard.

His glance narrows; his smile fades; zounds, he has found it! — or found something, anyway.

"Er — I see," he murmurs calculatingly;

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and retaining his finger-hold he uses the other hand and inserts his pick, butt first. He taps. "Is that it?"

The young woman advances, on the other side, and she, too, peers. What a fierce expression she has for one who should be all-pitying! I wish she would n't look into my mouth. It is my property, mortgaged though it may be by reason of the extensive repairs. I don't think that looking into a person's mouth is proper pastime for a young woman. It certainly must destroy her faith in the divinity of the human creation, and make her an atheist.

"Is that it?" queries the dentist, tapping.

"Don't 'hink so. Negst," I garble. If I only can move him along, down the row, I have a chance to escape.

"Ah, I see," he murmurs; and his face brightens. "Discoloration — yes, you have a small cavity started." He reaches behind him, and without turning his head accurately seizes another instrument — a miniature probe of wire-like taper without the ball point. Dentists always file off any ball points on their instruments.

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This he inserts, and prods around, with delicate and sure hand. I can *feel* that sharp wire penetrating in and in, and on and on, and presently it will pass, rapier fashion, down through my alveolar process, through that mysterious mass of nerves and tissue and bone, and probably protrude outside my collar. But while I am braced to yelp, he extracts it, examines the point in order to measure the depth, even sniffs at it, with his third hand (for dentists, as you are aware, have more hands than a monkey) inserts a mirror, and twists the mirror in various directions so that it clatters pleasantly. A dentist should make an expert heliograph operator.

"You have a bad molar there, too," he remarks, as the mirror clatters along, exploring my interior. It pauses, while he examines.

"Have I?" I gurgle. "It 'sh aw-right, though. Doesh n't borrer any."

The young woman examines. The stony expression in her clear gray eyes petrifies me, and on the end of her nose is a freckle.

"It will need attention some day," con-

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tinues the dentist. "And so will this bicuspid," and he taps it. "Who put that filling in, I wonder."

"You did," I retort.

But he shakes his head, and wipes his mirror on a napkin.

"No, I think not," he says. "Let me see, though." And while still firmly holding down my lower jaw with his finger he reaches some eight or ten feet in the other direction, to a card index. He plucks out a card which comprises a diagram like the diagram of a horse's mouth in a veterinary manual, and scrutinizes it. I assume that this is the diagram of *my* mouth, but I can't recognize it. For one thing, it has too many teeth. It must be an ideal diagram.

"No, that 's not my work. I thought so," he declares, of course. "See?" I don't see. "I never would have put an amalgam filling in such a place. It should have been gold."

A dentist is presumed, and he is so rated, to know his own teeth, but you can't get him to admit part ownership in poor work. It is always the fault of another dentist, or

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of the tooth. However, the case was not to the point, and neither was the post-mortem chart.

“What about that first tooth?” I hint.
“Do you think it needs fixing?”

“Oh, yes; certainly. There’s a cavity started, beyond doubt.”

“Going to fix it now?”

“Yes, sir. I have a vacant half hour.”

“Will it take long?”

“No, I should n’t think so.”

“Not a big cavity, is it?”

“Um-m-m — no; apparently not.” He rummages about in my mouth, with finger and mirror and relays of instruments, trying to clear away the other teeth so that he may get a different look. He looks. “Um-m-m — there’s quite a soft spot. You never know,” and he brightens hopefully, “what may open up. Sometimes a large cavity will scarcely show on the surface. But we’ll soon see.”

He at last removes his restraining finger from my lower jaw, and I can close and swallow. But the respite is to be short. The scene is one of alarming activity. The

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young woman springs at me and tightly ties a bib around my neck. I submit to her embrace, but I don't love it. The dentist has got out all his instruments, every one, each different — and each, as I know, worse, except the wadder, as I call it, with which he packs the filling. I always look forward to the moment when he takes up the wadder.

He dumps them upon the little leaf-table, under my nose, and rolls them about lovingly. He selects the sharpest and inserts it into his electric drill — and tests the drill with a preliminary buzz. Evidently it is in fine fettle. The young woman brings a fresh glass, and renews the pile of napkins, and leaves a drawer open so that I may see a row of shiny forceps. Then by main force they tip me back, until I lie staring upward like a flounder.

“All right,” says the dentist, which is his “Open sesame”; and I open. The young lady immediately tucks a hospital size roll of absorbent cotton well back into the hinge of my jaws, and I am gagged as effectively as I am trussed and stretched.

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The dentist is ready; apparently so am I, but I am not. I have a question to ask. He nimbly picks out his first tool — which, I can see along the bridge of my nose, is only a swabber (these terms are not very technical, I agree) and he industriously swabs. I let him.

He discards the swab, and *seizes the drill!* Now the supreme moment is upon me. Before his hand fills my mouth I stay him by a convulsive sound.

“ ’Ill it ’ut? ” I utter despairingly. I have cast all false pride aside. This is no time nor place for conventional heroics. I bare my very soul, even before the young woman; I want to know if it is going to hurt, and I expect him to lie to me. He obligingly does.

“ Oh, no; not much. Steady, please.”

“ Brrr! ” The drill stops, having failed to make me jump, and seeks another spot. “ Brrr! ”

“ Sensitive? ” queries the dentist.

“ Not at all, ” I gurgles, foolishly.

So the drill finds another spot. I wince. Aha! That was the symptom awaited.

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“Brrr!” hastens the drill, with diabolical joy. “Brrr! Brrr!” It sounds like an automobile on low gear. “Brrr! Brrr!” It is snugly embedded, eating in with the fell, remorseless march of a mustard plaster — of a mustard plaster concentrated and focused and tied fast with adhesive tape. I don’t believe that he can pull it out again. If there was n’t any cavity before, there is one now; and it’s getting as hot as Hades. I must endeavor to think of something else.

Like other dental offices, this one is located directly opposite a clipping bureau and a wholesale merchant tailoring suite — or something of the kind. Along the bridge of my nose and over the ends of my toes I can see across to their floors. They appear all free and happy and careless. The girls of the clipping bureau take turns standing at their windows and fixing their hair, while they gaze over at my dentist and me. They laugh and comment with the abandon of señoritas at the bull-ring, or Roman ladies at the arena.

The merchant tailor and his clerks and his cutters form another set of spectators;

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they sit on their window ledges for hours at a time, enjoying the show. But I am helpless in my indecent exposure, and the dentist callously grinds away. He even sings to himself; and "Brrr! Brrr! Brrr!" sings the infernal drill.

It has dug a well about six feet deep, and the time has come for me to protest.

"Hurt a little?" asks the dentist, pausing to cool his instrument so that he can hold it. "Must be a little sensitive there."

I nod and gurgle. My mouth is afloat; if I don't swallow I shall choke; but I can't swallow and I don't choke; I only go through the tortures of it. The dentist inserts a sort of a hookah stem which hangs to my lower teeth on the off side, and empties me by hydraulic suction, so I merely dribble.

"Shtrike nerve?" I splutter.

He smiles pityingly; not with pity for me, but with pity for my weak ignorance.

"Oh, no. I'm not near the nerve — *yet*. But there's apt to be a little sensitiveness when the drill passes through the dentine. Um-m-m — the cavity is larger than I

IN THE ORCHESTRA CIRCLE

thought, however, now that I'm opening it up." Cavities always are. "Let me take a look." In the interval while he drops his drill (I can see that the point is white-hot, just as I had thought) to cool it, and grabs his mirror, my tongue darts to that tooth—or where the tooth used to be.

Cavity! Why, I can stick my whole tongue into the vacancy. And I do, until the dentist drives it out with his mirror, although there is space for both.

After the mirror, and while the drill is cooling, he loses no time but turns to hand work. I crane and see what he has before he sticks it in. It is one of those chisels which look like a gooseneck putter in miniature. He digs, he chips, he splinters; the perspiration stands on his brow, my head is almost wrenched from its neck. He has found the much-sought-for sore spot; he can tell by the way I scowl at him, and curl my toes. He works at that sore spot with the persistency of a mouse gnawing to freedom. Ever and anon he squirts water in, to hear it hiss and to ask mechanically:

"Does that hurt?"

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It does.

He resumes his drill. He discards dulled instruments and grabs fresh ones, while the young woman frantically sharpens the old ones. The scene demands a Dante or a Doré; and I demand any release, even death. But no one dies from seasickness or the dentist.

I was a long time in the chair — this present chair, I would say; oh, a very long time. Ages passed, and all the instruments had been sharpened and resharpened, and people had come and gone and my lower jaw was immovably ossified, and really nothing mattered any more, when suddenly he sighed, clattered about inside with his mirror, and at his grunt the young woman deposited beside him a little bowl of amalgam! He picked up his wadder — that blessed instrument for which I had been waiting, but which seemed never forthcoming.

“Done?” I gurgled, a wild thrill arousing me to hope anew.

He nodded. Could it be? Yes! He granted himself the last indulgence of a

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few more pecks, wound up by a salvo of superheated air accurately directed by an asbestos bug gun, and now he must wad.

No more delicious morsel ever enters human mouth than that first bit of amalgam — the actual and visible evidence that the worst is over. He packed; he wadded; he plainly enough was bent upon dislocating that jaw, if he could, and I blissfully let him pack, and wad, and do his D.D.S't.

The tooth was crammed fuller and fuller; I could hear the amalgam scrunch and scrunch — a delightful sound, for it was filling the hole, and no drill should get in there again.

The dentist scraped off the edges, bestowed one final examination, bid me bite down (he withdrew his finger first), re-examined, and sighed approval. He removed the gag, and the hookah stem, and invited me to spit. I spat — thereby ridding myself of accumulated swallows and considerable amalgam. He took off the bib, tilted me forward to perpendicular, and I was free to rise.

Suddenly I loved that dentist, after all,

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despite the fact that his coat sleeve had worn most of the skin from my nose and that my two jaws did not meet by two inches. However, they came together gradually, during the next few days, although for a time my molars seemed prone to miss connections and to grind upon my bicuspid.

“Drop in, in a day or two, and I’ll polish it,” he invited, referring to the tooth.

But I did n’t, and I sha’n’t, although the Lady-Who-Married-Me thinks that I have. I never have the time and the inclination together. Enough for me to walk the bright street, my chest out and head slightly canted from the extra ballast, happy in the consciousness that I have been through the shadows and have again survived, with credit.

CHAPTER III

ON A DIET

BUT being on a diet is worse than having your teeth filled. From the standpoint of physical pain, it is n't to be compared to the dentist's tortures; but the mental anguish of it — oh!

The human stomach is closely connected with the welfare of man.

This is a competent beginning. It is a premise which I defy anybody to gainsay. It is a Rock of Gibraltar. It is a Mount Ararat in the midst of a flood, and I confidently perch there, while around about exists no bottom.

The human stomach as diagramed in the encyclopedia resembles the map of South America, and as a potentiality exercises the revolutionary characteristics of that realm. It varies in size: in youth being longer than thick, and reaching from the chin to the heels; in ripe maturity

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being thicker than long, and reaching from the back two feet beyond the natural plumb-line.

However, 't is not for me, a layman, to essay a description of stomachs in general. One stomach is all-sufficient for the confines of this essay; and that is my own stomach.

Throughout my life, to the period of which I am about to write, I had been pleasantly associated with my stomach. There was not what you might term an intimacy between us; I never had seen my stomach, I never really had given it much thought, it was rather a silent partner in my anatomical organization, content with its dividends three times a day and rarely growling. "*Ave atque vale*," "welcome and pass on," seemed to be the motto above the doorway of its private office. Good old stomach, which in moments of great satisfaction, say after Thanksgiving dinner or other gastronomic event, I occasionally ventured to address, with a pat, as "Bill."

"Bill," mysterious "Bill," was well past his hobbledehoyhood of lankness and more

ON A DIET

length than thickness, and was nicely rounding into form (I write this literally), when he got a grouch. I don't know why. We all tried to find out, but he proved to be a noncommittal cuss; and as there is no accounting for tastes, so there was no accounting for the taste in my mouth.

By this taste did Bill the stomach announce his grouch, the tongue seeming to be his office-boy.

The Lady-Who-Married-Me decided that no doubt I was "a little bilious," and she prescribed a casual attention to diet.

"I would n't eat quite so much for a day or two," she said wisely. "Give the stomach a rest. Maybe that pie last night upset you."

Just why only half — a customary half, to which silence always had given assent — of a nice crispy hot apple pie suddenly should offend Bill I could not understand; but as the advice of the Lady-Who-Married-Me uniformly is good, I took it and humored Bill to the extent of a pretense at "diet." I had coffee, dry toast, and poached egg for breakfast; bread and milk

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for lunch; a chop, a baked potato, and a bit of tapioca pudding for dinner.

Bill was not placated. He kept his office-boy, of disagreeable mien, at his portal, and the aura of the private office itself appeared to be a portentous dark brown. Evidently the grouch continued.

We both — the Lady-Who-Married-Me and I — were considerably puzzled by the attitude of Bill the stomach. We catered to him by every means within our knowledge. Of course, a stomach is hard to deal with, being so secluded. You have to work largely by guess. I hate to argue with man or woman through a screen door, and to argue through a keyhole is worse. The taste persisted; Bill's doldrums persisted; nothing that we could devise, by help of the huckster, the grocery, the meat market or the drug store, evoked from him a cheery word or a smile, and finally I took him to the doctor.

The doctor did not evince particular alarm; he was not much impressed by the vicious demeanor of the office-boy tongue and merely "a-hemmed" in a bland man-

ON A DIET

ner when I told him that sometimes I felt as if I were entertaining a boiled sea-urchin. He asked me if I had had similar trouble with Bill in previous years; and when I informed him that our relations always had been most harmonious, he bestowed upon me a small envelope of drab disks the size of undershirt buttons, and asserted that if I took one before meals I would soon be "all right."

But he did n't know Bill. Neither did I. As a stomach Bill was dreadful "sot." He had inherited a characteristic of my family.

The doctor counseled me to go slow for a few days; to "diet" a little.

"I have been dieting, Doctor."

"Well; continue. Relax in your work; take more exercise; seek variety in your recreations and your food; stick to what agrees with you; when you find something that does n't agree with you, drop it."

That was practical. The trouble was, that what did n't agree with me was Bill the stomach; and to quit Bill seemed out of the question.

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The doctor's button disks were a new taste, while drifting down, and I swallowed them religiously, according to directions. They were ignored by Bill, but I had nineteen of them to dispose of. I also piled out of bed at six in the morning and took Bill for a brisk walk before breakfast — five blocks down the street, three blocks across, six blocks back up that street, the three blocks, in reverse, again, and one block home. All the late cats and early dogs along the route soon knew me well.

After breakfast I walked to the farthest car-line; at noon I walked around several down-town blocks; and in the afternoon, arriving home about four-thirty, I mowed the lawn or dug new garden holes until dinner, and following dinner we walked again — the three of us, the Lady-Who-Married-Me, I, and Bill.

For Bill was still much in evidence; that is to say, he was much in effect, although, like the Mikado of old, he was not to be seen. He was still an immovable body against which we had arrayed no irresistible force, notwithstanding the fact that I

ON A DIET

had swallowed all the drab disks and had been supplied by the doctor with black ones.

"Try eating more fruit — fresh fruit," advised the doctor. "And take a glass of hot water upon arising in the morning. Limit yourself to the easily digested foods, such as eggs, malted milk, and soups."

"I shall diet now in strict earnest," I said to the Lady-Who-Married-Me, "and cure this thing up. It's run long enough."

"It certainly has," agreed the Lady-Who-Married-Me.

About this epoch I rode down-town with Brown — Brown of Brown & Jones, to be exact. Bill the stomach's unhappy frame of mind was making me unhappy also, for this falling out of old friends distressed me much.

"Getting thin, aren't you?" queried Brown delicately. "What's the matter?"

"Oh, stomach's out of whack," I explained specifically.

Brown was all sympathy.

"That so? What you doing for it?"

"The doctor gave me some stuff, as a helper. Then I'm drinking hot water be-

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fore breakfast, eating plenty of fresh fruit, and limiting myself to a light diet."

Brown nodded.

"I see. Diet's the thing, and the only thing in a case like that. But you take my advice and cut out the hot water. *Cold* water is what you need. Hot water relaxes the stomach; cold water acts as a tonic — by reaction; understand? Mrs. Brown had a stomach just like yours, and hot water never feazed it; she changed off to cold water, and was well in a week! Cold water is a bracer. And if I were you I would n't tackle much fresh fruit. Lots of stomachs won't stand fresh fruit; makes acid. Acid keeps the stomach irritated. Now, my wife can't touch fresh fruit at all; neither can I. But we eat plenty of cooked fruit."

Brown's advice sounded good; the Lady-Who-Married-Me agreed with it, and the only question seemed to be whether it agreed with Bill the stomach. However, the Lady-Who-Married-Me had an amendment to offer.

"I was talking with Mrs. Smith to-day and I happened to mention that you were

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having a little trouble with your stomach, and *she* thinks you 're taking too much exercise. Mr. Smith had exactly the same trouble, she says, and he could n't do a thing with it until he began to rest more. For a month he had his breakfast in bed, and he rested an hour before and after every meal; and it cured him."

That also sounded reasonable, inasmuch as the exercise régime had not prevailed with the obstreperous Bill. I followed Brown's suggestion as to the cold water and the cooked fruit instead of hot water and fresh fruit; instead of exercise I tried to rest. I quit the walks and the lawn and garden; my ante-breakfast route witnessed my passage no longer, and I scrupulously lay upon the couch an hour after breakfast and was late at the office; came home at noon to rest likewise an hour before and after lunch (thereby missing important noon conferences); and even rested an hour before and after dinner.

All this did not especially please Bill. His motto above his portal, once reading, so comfortingly, "*Ave atque vale*," now

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appeared to be "Abandon Hope of All That Enters Here."

I had been taking the rest cure by lying on my back, until the Lady-Who-Married-Me read in the poultry journal's "Health and Wealth" column that *after* eating, one should lie upon the right side. This "facilitated the passage of the food along the intestines." Horrors! Here I had misunderstood Bill's appeals, and had been increasing his grouch by lying on my back both before and after.

It was about time to change doctors. White — Ben White, the undertaker — sent me to a good one who had cured him (White) of another stomach trouble "exactly" like mine.

"He'll fix you up," assured White. "He does n't give medicine, much, but he's great on diet."

The doctor interviewed the office-boy tongue, "a-hemmed," and asked me what I had been accustomed to eat. He shook his head over the word vegetables.

"There's the point," he said. "Yours does not strike me as a vegetable case. You

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are crowding your digestive apparatus with an excess of starch. Eat more meat and less of the fibrous, starch vegetables; in fact, for a time quit starchy foods entirely — white bread, pastry, and all — and confine yourself mostly to the lean meats. That will give your digestive apparatus the needed rest. And you'd better stop fruit altogether, whether cooked or fresh. Have your meat ground, and chew it well, but don't mix fruit acid with it."

"How about breakfast?" I queried.

"Meat for breakfast, by all means," he declared. "Meat for breakfast is preferable to meat at noon. The stomach is much more able to take care of it in the morning, after a night's respite. I believe in meat for breakfast."

This again sounded like reasonable doctrine, and I left the office quite encouraged. If Bill wanted meat, meat he should have, no matter how much it cost. We raised our own vegetables — Lady-Who-Married-Me and I — but meat we must buy. However, no matter, if only Bill was placated.

He didn't seem to approve, decidedly,

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of the meat diet; but a happy thought was communicated to the Lady-Who-Married-Me, and she in turn communicated it to my own eager ears.

“Mrs. Holt says that she was bothered for a year with her stomach, just like you, until she went to an oculist. He said that it was her eyes — she had eye-strain; and he fitted her to glasses and she’s been perfectly well ever since she put them on.”

And I had been blaming Bill! Blaming patient old Bill, who was being made a scapegoat by those rascal eyes! Sure enough; the oculist found my right eye two octaves flat and my left eye badly faded. It was a wonder that I had been able to see at all, and it was *no* wonder that my stomach had troubled me.

“You’ll feel much better now,” he encouraged, when, effectually short-circuited by those confounded rims, I left, stepping high, as if avoiding stray eggs.

Improvement was very slow: the eyes did not yield and acknowledge the corn gracefully, and Bill’s grouch had become a habit.



“‘It’s too low at the bottom end, and forms a sac that holds the food too long.’”— *Page 37*

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"Losing flesh, aren't you?" invited Jones — Jones the insurance man.

"Yes. Stomach's gone back on me," I proffered.

"What are you doing for it?"

I told him. He at once saw the error of my ways.

"Now, you listen to me," he bade. "I had the same kind of stomach trouble a couple of years ago, and I know just what you're going through. Doctors are all right, but they make mistakes, like anybody will; and dieting is all right, if properly carried on. I believe your stomach's dropped! It's too low at the bottom end, and forms a sac that holds the food too long. Understand? The less work you give it, with ground meat and soft stuff, the worse it will be. What it needs is exercise to strengthen the muscles. You try eating whatever you fancy, for a while, and make the stomach work. The fact is, we modern people save the stomach too much, with our predigested fodder, and let it loaf on us. Then the muscles relax. But cut out the liquids; cut out soups, and don't

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drink more than a few sips of water at a time. I quit liquids, but I ate everything in moderation, even pie. That old hoax that piecrust is indigestible is exploded; it's just the thing for the stomach to work on."

Now this *did* sound reasonable. Bill was loafing on me, was he? Soldiering, eh? Sly old Bill!

The Lady-Who-Married-Me nodded.

"I've heard of dropped stomachs," she averred. "Mrs. Martin had one. She drew it up by exercises. And as for pie, it never *has* hurt you, has it? If I were you I'd go right ahead and eat whatever I wanted, but I'd avoid liquids. Drinking with meals is bad anyway. Why don't you try quitting coffee, too? Now's a good chance. Perhaps coffee does n't agree with you."

The return to three square meals a day was delightful, although they were rather dry. Mrs. Martin showed the Lady-Who-Married-Me several muscle exercises that helped to cure her, and would cure me. They consisted in pausing during the day,

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and, without interference with the breathing, waggling the stomach in and out, or up and down, to be specific, twenty-five times. The same was to be performed in bed, when awake. During business hours opportunities were so haphazard that frequently I was much embarrassed, caught in these convulsions; but I persevered, and Bill grew sore.

As for me, apart, I missed my coffee and my water, and was shrinking so rapidly that I could slip my chin inside my former tight collars.

Happily, the washerwoman came to the rescue.

“I was telling Mrs. McGraw (who was the washerwoman in question) about the siege you’re having,” informed the Lady-Who-Married-Me, “and she asks, why don’t you quit eating breakfast for a while? She had your stomach trouble, and the only thing that cured her was omitting breakfast. Lots of people *don’t* eat breakfast. An old German doctor proposed this to Mrs. McGraw. He said that in the morning, after a night’s quiet, the stomach was n’t

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ready to start right in on food. Why don't you talk with Mrs. McGraw?"

I did.

"Yes, sir," retailed Mrs. McGraw, — who was thin and yellow and not, as seemed to me, very robust, — "I've eat no breakfast for over a year, an' I ain't been troubled with dyspepsy since. All I take, when I get up, is a cup of coffee."

"But are you sure that coffee is good for you?" I demanded.

"Yes, sir, I am," declared Mrs. McGraw. "This idee that coffee hurts people is all humbug. My doctor says that a cup of nice strong coffee taken clear never hurt nobody. They think it does, but it don't; it's something else."

"You might try it, dear," suggested the Lady-Who-Married-Me. "I've always heard that if you took coffee without cream or sugar it was n't harmful."

Going without breakfast usually gave me a headache, but coffee might act as a "stayer" until luncheon-time. Besides, I like coffee, and Bill never had objected to it — much. Therefore I proceeded to adopt

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the McGraw system, and warmed Bill with a cup of clear coffee in the morning but annoyed him with naught else.

I have read of sea-cucumbers, big worms, who can turn themselves inside out and inspect themselves. But man has no such structural advantage. As Doctor Henny explained:

“You cannot get at the stomach. You can put a broken arm in a sling and keep it quiet; you can’t do that to the stomach. Therefore the process of healing is very slow.”

This was another doctor, recommended by my friend Edwards.

“You go to Doctor Henny,” said Edwards. “Tell him I sent you. I had your stomach trouble, and he was the one who fixed me right.”

Doctor Henny “a-hemmed.”

“The main difficulty is,” he explained, “that you go too long without sufficient nourishment. You’re weakening yourself. Dinner should be eaten at noon. Omit breakfast, if you like, but eat your hearty meal of the day at noon instead of at night.

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Dinner at night is bad, anyway. At close of day the human vigor is low; we load the stomach with a great mass of stuff, the stomach is inclined to be sluggish; we sit around, and read, and draw the blood to the brain, the food ferments, and frequently we go to bed with it undigested; then in the morning we have that 'bad taste.' The custom is wrong, dead wrong. We must digest with our legs as well as with our stomach; and we should eat our hearty meal of the day in the midst of activities, not at the end."

About the same time I made a discovery, for myself! It was in the "Current Comment" of a monthly magazine. "I ought to drink more water, dear," I announced. "Scientists have been experimenting, down at Washington, and they've proved that plenty of water drunk during meals helps digestion instead of retards it! Some of the experimenters drank a quart of water at a meal!"

"We've been doing wrong, then, have n't we!" deplored the Lady-Who-Married-Me. "We've always been taught that

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much water with meals was injurious. And you've been drinking none!"

I was glad to be on the water-wagon again, for water with meals always had been one of my delights. Nevertheless, Bill acted mean as dirt about it.

By this time I hated Bill with fierce, hot hatred. I would gloatingly have consigned him to hara-kiri, could that have been achieved without permanent detriment to myself.

My eyes were acting outrageously, and the Lady-Who-Married-Me was sure that the glasses did not fit. As the oculist insisted that they did, I went to another man who was the same thing under a different name, and who had been recommended by our neighbor Henderson.

He found that the glasses fitted as well as practicable; but he said that he could do little until my stomach was quieted.

"On the other hand," I suggested, "is n't it likely that the eyes are what cause the stomach?"

"Oh, no," replied he. "The stomach undoubtedly is affecting the eyes. Er—

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by the way, what are you doing for the stomach?"

I told him.

"I see," he mused. "Er — are you a teetotaler?"

I admitted a democratic leniency, although, as Bill could testify, "soft drinks" and kitchen brews were our standbys.

"You try," counseled the oculist under a different name, "a small glass of sherry before meals. Try it. It cured *me*. I had your dyspepsia (he did n't though, and such an assertion was insulting) for years. Took everything, did everything; got down to ninety-seven pounds. An old family doctor put me up to this experiment of sherry; some stomachs need the stimulant to excite a flow of the digestive fluids."

While I was standing on a corner that noon, waiting for a car, and with a bottle of sherry in my side coat-pocket, Peters, the attorney, came swinging by.

"Hello," he hailed. "Been to lunch?"

"No; I'm going home at noon, now," I explained.

"That so? Losing flesh, are n't you?"

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“ Yes. Stomach ’s gone back on me.”

“ I see. Knocking off afternoons, are you? That ’s right. Just you keep it up.”

“ Not exactly. But we ’re having dinner at noon, instead of at night. Thought I ’d try that for a spell.”

“ Don’t you do it; don’t you do it, old man,” besought Peters, earnestly. “ I know some doctors advise it, but it ’s a mistake, in a business man. Makes you stupid all the rest of the day. Now, in the evening a man is through with the day’s work, or ought to be; his mind is at peace; he has plenty of time for his meal and for quiet afterward. I had your stomach trouble; know what it is, precisely; know what the doctors advise; but I never gained one iota by having dinner at noon. Made me worse.”

“ But I understood that it ’s not best to sit down, for the evening, after a hearty meal.”

“ Bah! ” scoffed Peters. “ Don’t animals usually sleep after eating? Did n’t you ever hear of the two dogs — fed at the same time on the same articles, and one taken for a

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long walk and one left at home? And how, when they were killed and their stomachs were examined, the stomach of the one who had been left at home was empty and the stomach of the other was still full? No; you use common sense: eat a good breakfast, skip noon entirely, and have a regular dinner at night. Just try that for a while, and I'll guarantee it will fix you."

Peters' voice was confident; his form and complexion were convincing; and I somehow felt that maybe I had missed Bill's demand by just this simple margin — a mere error of sequences, in the combination of meals. So I more hopefully hastened home (accompanied by Bill), with the news and the sherry.

The sherry would have been first class, had Bill the stomach taken to it with any relish, and had the Lady-Who-Married-Me not immediately come upon the difficulty in the tentative treatment. She found another item, which read:

"Experiments have demonstrated conclusively that the introduction of alcohol, in any appreciable quantities such as is con-

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tained in wines and spirits, into the human stomach, at once produces a congestion and a distinct cessation of the digestive fluids. Thus those persons who ignorantly think that by drinking wine or spirits or so-called 'bitters' as an 'appetizer' they are aiding digestion, are doing the very opposite. All the stimulus received is a false stimulus."

"There!" gasped the Lady-Who-Married-Me. "It's just as well—and I'll use the sherry in puddings, when you can eat them."

So we finally decided to take Bill to a sanatorium. I went along, in my astral body (my physical proportions having vanished); the Lady-Who-Married-Me went, in order to see that careless people did not sit on me or step through me.

"Please drive slowly. My husband is a very sick man," she tenderly explained as I was airily flipped into the 'bus which would convey us to the sanatorium.

When we had gone about two of the miles, a thunder storm—sort of cyclone and cloudburst—bogged the 'bus, carried off the team, and left us stranded before a shack of a farmhouse.

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"Sick man," announced we all to the Mrs. Farmer, who viewed our advent with concern. "Can you keep him overnight?"

"Mercy on me!" ejaculated the Mrs. Farmer. "S'pose I can, but I ain't got a thing in the house fit for him to eat. Hens ain't layin', an' spring chickens are all gone, an' cow is dry."

"It does n't matter," assured the Lady-Who-Married-Me. "He can't eat. His stomach has gone back on him."

"Pore man," commiserated the Mrs. Farmer.

So they put Bill and me in a bedroom; the Lady-Who-Married-Me of course was determined to stay to the end, but the sanatorium employees trudged away.

"There's not a thing here for you to eat, dear," reported the Lady-Who-Married-Me, after a reconnoissance. "But do you think of a thing you *can* eat?"

"Not a thing," I responded accommodatingly.

After the Lady-Who-Married-Me had left, along with a clatter of dishes was

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wafted in through the door ajar a delicious odor. I realized that somewhere, near at hand, strong, ostrich-gifted men and women were sitting about a festive board, like gods and goddesses on Mt. Olympus, and were devouring ambrosia. Bill pricked up his ears; I felt him do so.

The more I sniffed, the more covetous became Bill; and while the office-boy tongue actually perspired with eagerness I called lustily for the Lady-Who-Married-Me.

She came, bringing with her more of the wondrous atmosphere.

"What is that?" demanded Bill and I.

"What, dear?"

"That smell."

"Dearest, is n't it awful? I'll shut the door. But do you know, pork and cabbage is all the family has for dinner."

"For the love of Mike!" chortled Bill and I, while the office-boy tongue driveled. "Send some in."

"Boiled pork and cabbage, dear?" she gasped. "Oh, my darling!"

"Then I'll die fighting," I announced.

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“And if by the time I reach that table there is no delicate boiled pork and cabbage left, the tragedy will be general.”

I being desperate, and Bill being desperate, and the office-boy tongue being almost uncontrollable, to placate us a morsel of boiled pork and cabbage was marched in to us, and the Lady-Who-Married-Me and the Mrs. Farmer and the hired man stood about with bated breath.

But there was no need of fear. Bill jumped for that pork and cabbage. In half an hour he sent up word for more. At midnight he was ready for pork and cabbage breakfast; and after breakfast he was ready for pork and cabbage dinner.

We did n't go on to the sanatorium, for Bill was all right. He has been all right ever since. However, anybody reading about my experiences with diets will see how to cure stomach trouble—albeit boiled pork and cabbage of course is not the thing to try.

CHAPTER IV

"BETTER SEE THE DOCTOR"

"**D**EAR, you are n't well, are you?" solicitously accuses the Lady-Who-Married-Me.

"No, I don't feel extra well," I admit virtuously. "I feel beastly."

"I knew you did. But why have you been keeping it to yourself?" It always rewards me to realize that I am a martyr of the sterner stuff. "That is so like a man. Where are you feeling sick?"

Now, that is a most irritating question. Where am I feeling sick! Where! When I'm feeling beastly!

"Oh, I'm all off. I've had a headache for three days, and nothing tastes good. Stomach seems upset. I feel beastly."

"Then why did n't you tell me?"

"I did n't want to worry you," I magnanimously inform.

"But it's so foolish to try to conceal

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those things," she reproves, severely. "You ought to go to the doctor. You might have something very serious the matter with you. Where else do you feel sick?"

Where else, indeed! Why, when a man feels *beastly*, there's no "where else." He has covered all his territory, explored and unexplored.

"Everywhere. Generally mean," I groan. "I don't know *what's* the matter." And now I feel much worse than before. I can afford to give way to it, at last.

"Then you must see the doctor," proclaims, in most gratifying alarm, the Lady-Who-Married-Me. "Promise me you'll see him at once, without any more delay. You can't tell *what* may be the matter with you and you must n't let it run. You owe it to me as well as to yourself to have whatever it is attended to immediately. Promise me!"

"All right. I guess I will, then," I promised.

Planning to see the doctor, one first makes preparations as for a long absence from familiar haunts. It is quite impossible to

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see a first-class doctor, except through the crack when the door is hastily opened, in less than half a day; and then, while he is occupied on the far side of the door in making three dollars every ten minutes, you, on the near side of the door, are occupied not at all, and losing, if you are a person of any consequence whatsoever, at least ten dollars a minute. The longer I sit in the doctor's antechamber, the greater my earning capacity appears.

So I put my office affairs in order and started for the doctor's office early, in order to be first. But I knew that I would n't be first. I never am.

The beastly feeling had assumed curious quirks and turns, ebbing and flowing like the toothache. When I reflected that I carried only three thousand dollars life insurance, I had Bright's disease or else cancer — the symptoms, you know, being identical; and when I apprehended the interval before I would be told which, I was sure that I had neither.

Of course I was n't first. Sometime I should like to throw down a blanket outside

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the doctor's suite and camp there all night, in order to see who really is first, especially whether it is the two women with one baby, the man with the largely developed foot, or the other man with the bandage around his jaws. I have an idea that one of these three is constantly employed on hand as a nucleus, on the theory that like draws like.

These community reception-rooms adopted by the modern doctors and dentists I don't fancy at all. Around about is a succession of closed doors bearing portentous symbols, and ever and anon a next unfortunate is summoned to the mysterious realm beyond. If you are in a hurry and waiting on Doctor Brown, Doctor Brown's doorway is the popular one.

Having crossed the threshold of the reception-room, I join the sad, shamed assemblage now gathered, each wondering what is the matter with the others, and all suddenly telepathically inquiring what is the matter with *me*. The attendant nurse whisks out from one of the lairs, mentally sizes me up, registers me in her professional category, asks whom I wish to see,

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and disappears to tell him that another one has arrived. I may find a seat, which is adjoining the seat of the man with the broken jaw and opposite the man with the swaddled foot.

What do you suppose is the matter with *them*? What do they suppose is the matter with *me*? It is a great study in the anatomy of melancholy. Occasionally the door opening to admit another sample of erring flesh interrupts; and now and again the nurse's inquiring "Next?" causes a hopeful stir. But we do not lose sight of symptoms, nor laugh and jest in happy comradeship.

I have my beastly feeling thoroughly briefed, with all the gradations in proper sequence leading up to the climactic declaration that will embrace all. I would like to make a memorandum of those symptoms — in fact, I should have made a memorandum, for I well know that I shall omit the most important. It is easy to see which of us has new symptoms, by the way with which he or she hustles confidently in, when called. Doctors are always glad to be informed of new symptoms, I presume; that

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is what makes life interesting to them. It must be very dull to have a malady merely flow along and not require fresh combinations of hieroglyphics for the perusal of the druggist. My symptoms sound to me prosaic, but I don't mean to disappoint the doctor if I can help it.

I am next. I am certain that I am next, at last — although when I recount noses and manifest ailments I have forgotten whether that elderly woman catty-corner from me came in after me or before. I alertly follow the back of the nurse through the door obligingly held open by her.

She closes the door, and here I am, facing the DOCTOR. Now if he tries to tell me that my beastly feeling does n't amount to much, I shall be thoroughly indignant. And probably he will, confound him, after I have waited so long and have made my mind up to the worst. He even will charge me as much for telling me one thing as another.

There he sits, immaculate, calm, scientific, reviewing the ills of the world while they pass before him in one door and out another, at three dollars a ten minutes.

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“ How are you, Doctor? ” I address, in a manifest effort at buoyancy, which should impress him with the gravity of the situation.

“ How are *you*? ” he responds, promptly putting me in my proper place; and I may shake the hand that wields the scalpel, the while beyond him I may glimpse the nurse frisking about in the ghastly-white operating-room, wiping up things and grinding instruments — perhaps for *me*.

Our interchange of greetings is mere formality. I don't care how *he* is (nobody worries about a doctor's health), and he is perfectly aware that if I were well I would n't come.

“ Not feeling very good, Doctor,” I candidly inform him. “ In fact, feel beastly.” And there he has the *dénouement* in a nutshell.

“ Um? ” murmurs the doctor. “ I see.” And what does he see, already? “ Sit down. How long has this been going on? ”

Zounds! How long has *what* been going on? Evidently his doctor's sixth or seventh sense has X-rayed me, and by his grave de-

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meanor I may understand that my plight is as serious as I had anticipated. Oh, he may charge me anything consistent with three diplomas (one in Latin), if he 'll only tell me the worst at once!

"About a week or ten days, Doctor."

"Any pronounced symptoms?"

If I but had that list! A few jottings, even, on my cuff, would help us both, no doubt. The trouble is, I'm not a quick thinker in a crisis, and now no one symptom seemed to take precedence over another. For fear of putting him on the wrong track, I would better generalize.

"Well, beastly, Doctor. Mean all over, you know."

"Um-m. Exactly. Let's see the tongue."

I exhibit "the tongue." His words express it: it is "the tongue," a changeling of which I would gladly be rid.

"Um," he announces, having surveyed the rascal, "slightly coated," and I return it.

He acts alarmingly relieved, as if he had been looking for a grave symptom and had



“‘Um,’ he announces, having surveyed the rascal, ‘slightly coated.’”—Page 58

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somehow missed it; so I will give him opportunity to retrieve himself.

“Pretty bad, is n’t it?” I well know that this tongue had the surface of a peeled banana.

“Not at all. A little furry, perhaps. Er — sleep well?”

Confound him! — for that was the one thing that I did do, sleep well.

“Yes, I sleep well enough, Doctor.”

“Appetite fair?”

I must cogitate an instant, so as to be very frank; there should be nothing withheld from the doctor.

“Pretty fair, Doctor. Nothing extra. Things don’t seem to taste right, somehow.”

“Losing weight?”

No, darn him, I was n’t! What is the use in his beating around the bush in this fashion, wasting my time? I must take the initiative, and insist upon his knowing the worst, so that I may know the worst.

“I have considerable headache, though, Doctor — a dull sort of headache. My wife thought I ought to tell you. And I seem to get dizzy if I stoop over and rise up

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suddenly, a peculiar sort of dizziness. I did n't know but that it might be my kidneys (Bright's disease!), or my liver (ossified liver!), or something wrong with my stomach."

Now I had him going!

"Backache?"

Hurrah! My back did ache, on occasion, but I had forgotten that. I hastened to assure him.

"Show me about where," he invited.

Contrarily enough, my back was n't aching at all just at present, and the last ache was n't permanently registered. A backache is a backache to me, except lumbago — which I never have. There is the hoe backache, for example; and the grip backache; and the backache when I try to wear a belt without suspenders: all aches cover about the same territory, somewhere between my waistband and the nape of my neck.

"Oh, along in here," I hazarded. "Principally the middle."

"Um! I see," responded the doctor. But he did n't ring his bell for the nurse

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and bid her attend us to the little white room beyond; he did n't consult a tome in his mystical library, and he did n't ask me how my affairs were and how much life insurance I carried. He left me sitting with bated breath and searching for very important symptoms that I had at my tongue's end when applying for admission, and, turned to his desk, he began to scribble offhand on a pad of paper, in a sort of decisive, dismissful manner which told me that my three dollars' worth of ten minutes was up, and the best had been done for me.

“ There you are,” he said, extending to me the slip of paper, with evident relief at having disposed of me so easily. “ Get this filled, please. It will fix you out, I 'm sure. You might drop in again, or 'phone me, in about a week, and let me know how you 're getting on.”

“ Then you think it's nothing serious, Doctor? ” I ventured, for I was still bound to know the worst.

“ Oh, no, no! Nothing whatsoever.” He was rising.

“ Er — not my kidneys, then? The diz-

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ziness, you know — and that backache — ”
I, also, was rising.

“ No, nothing of the kind.” He was up.

“ Or my liver? It seemed to me — ” I
too, was up.

“ No, no! Liver might be a little sluggish; often is. You ’re slightly logy, is all. Water-logged. I ’ve given you a prescription to correct it.” He began to back me. “ Pleasant day,” he proffered. “ Good-by.”

And with the nurse vigilantly hovering on the horizon, to lend him assistance should I prove too curious about myself, he bowed me in the direction that I ought to take.

I immediately found myself shut out in the hall, holding my hat and the slip of paper. Of course I could n’t read the prescription, which was a cunning combination of Japanese and Sanscrit and Ancient Hebrew. I could n’t read even the signature. All I could read was, “ xiii Meow Nig.,” and if this, as indicated, meant thirteen hairs from the tail of a black cat and had been written in pure food law language, while I would have eaten the prescription just as hopefully, the good doctor

“BETTER SEE THE DOCTOR ”

might have been handicapped by the humane society.

I took the prescription straight to the druggist. He might be able to read it all, but I would never know. If he could n't read it, or had n't time to stop and read it, then he would be at liberty to fill it from what he had the most of.

“Well,” I announced that evening to the Lady-Who-Married-Me, announced it blithely, as befitting a Spartan returning with his shield instead of upon it, “I saw the doctor to-day.”

“Oh! You did!” piped the Lady-Who-Married-Me, much expectant. “What did he say?”

“Nothing, special.”

“What did he say is the matter with you?”

“Nothing, special.”

“What did he give you?”

“I don't know,” I confessed with dignity. “But it will cure whatever I have.”

“I do believe you look better already,” encouraged the Lady-Who-Married-Me. “He certainly is a fine doctor.”

CHAPTER V

A LITTLE FLIER IN APPENDICITIS

A PRESCRIPTION, however, won't cure everything. Take appendicitis, for instance!

Some persons are born to appendicitis — as well as to measles, whooping cough, chickenpox, scarlet fever, sprained ankle, broken arm, diphtheria, typhoid, pneumonia, and so on through all the list. You know such individuals, and so do I. And some persons have appendicitis thrust upon them. I am they. But to assert that anybody should deliberately *acquire* appendicitis is a libel upon human intelligence. All these gibes about appendicitis being a fashionable cult are rot. All these jokes about having your appendix removed “while you wait” are rot. I used to be that kind of a scoffer myself.

No person who has a grain of sense will yearn to have an unoffending appendix re-

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moved just for the experience; and no sane person who has had the appendix removed will bid for the operation to be repeated. Fortunately it can't be. A beneficent Creator has given man only one appendix. Man does n't need even that; but there are many surgeons, so let him be generous.

Appendicitis formerly masqueraded as colic, stomach complaint, intestinal fever, and other ground-floor obscurities. Through generation after generation the appendix remained a sort of poor relation in the human system, as unacknowledged as though undiscovered. Now it is being discovered and acknowledged every hour, and oftener. I discovered mine suddenly at eleven o'clock in the morning. As a result repudiated, it is to-day in retreat in a bottle, and there it shall stay. No sympathy need be wasted on an appendix.

Chagrined at thus having fallen under suspicion myself, and still somewhat skeptical, I felt I must admit the Lady-Who-Married-Me into my discovery — albeit I was resolved not to confess my shame outside the immediate family circle. We can-

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vassed the situation, took careful observations, verified the latitude and longitude, and finally with bated breath acknowledged the hateful fact.

When the doctor arrived I obligingly volunteered him a plain case of colic caused by toast and scrambled eggs, or of neuralgia of the stomach. It might easily have been either; the main turmoil being center of stage, so to speak; and either would much simplify the situation when one is busy — as one always is if threatened by an illness. I never knew an illness to come that did n't encroach upon a rush order, or else upon a vacation.

However, to return to our appendix (I use this plural possessive in a collective sense, hoping, now that the reader is interested, he has, or has had, an appendix of his own). The doctor smiled gently, even wearily (the Lady-Who-Married-Me was horribly solemn), and remarking that it undoubtedly was a colic of a *certain description*, he proceeded to prod meditatively with his fingers that same old spot located slightly in the northwest corner of the south-



“Whenever he made me say ‘Ouch!’ he appeared particularly gratified.”—*Page 67*

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east section of township 7-12-6:30, range 45 degrees west of the abdominal meridian.

"Um-m-m. A little colic, evidently," he murmured.

A *little* COLIC! But I let this pass. Through several years I have noted that doctors, when summoned for headache, or backache, or toeache, or — er, neuralgia of the stomach, invariably begin with that spot just inward from and above the right hip. Their fingers may stray to other parts of the anatomy, but they always return again. It seems to be an infernal habit. Occasionally my doctor sighed, audibly, as if fascinated by the little tune that he was picking out here and there (mostly here) upon my lower front dedicated to aldermanic promise; and whenever he made me say "Ouch!" he appeared particularly gratified.

So, finally, as the moments fled, and as the enjoyment was all one-sided (a fact which he seemed bent upon proving), I ventured to expostulate, mildly but firmly, "Cut it out, doctor" — just to intimate that I had been explored that way before, that it was

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an old dodge and there was nothing doing, that I had an engagement downtown in fifteen minutes, and that he had better give me a dose of peppermint or paregoric and let me go.

But he misunderstood me; and leaning back, with finger-tips together and a satisfied air, he declared, blandly: "I believe I will!"

Some persons are enabled to wait, and to have the appendix deleted when it's asleep. That is all right, if you *can* wait or if you have n't the money. If you can't wait and have n't the money, then the surgeon can do the waiting. For this is one of the most aggravating features of appendicitis: to have to pay for something you never have used and don't want and don't need. A \$500 appendix, only two or three inches long and entirely obsolete and worthless, is a frightful extravagance.

I could n't wait; and while the Lady-Who-Married-Me fluttered disconsolately upon the front steps, and neighbors flattened their noses against front windows, I was whirled away, swathed in ambulance

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blankets, lying ignominiously on my back, bound for the unknown.

But after all, what is a simple operation for appendicitis, huh? Bah! Pooh! A topic for jokes in the comic columns. Something as common as measles. An inconvenience of perhaps six days — my doctor had been up and around in six days; perhaps of ten days — for Mrs. Jones, wife of Jones the haberdasher, had been up and out in ten days; perhaps, perhaps of two weeks at the farthest — for Jones, who had caught it from his wife, was a two weeks' man.

It comprehends merely making a quick incision with a very sharp instrument, snipping off a dangling thing about as large as a fishworm, and closing the wound again, whereat it heals immediately by first intention; modern surgery, you know.

When the doctor politely asked us which hospital we preferred, the Lady-Who-Married-Me and I were abashed. We did n't prefer; and our experience as onlookers was that no matter at what hospital anybody had been he (or she) always wished that he (or she) had tried another; it's just

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the same as summer resorts. We fain must tell the doctor, offhand, to take any and have the little job over with, so that I would get back to work within the week.

The hospital loomed large and austere, especially to a man on his back making exit feet first from the ambulance. He has scarcely time wishfully to choose the prettiest one of the nurses who look curiously down from the windows above when he glides, still wormish, underneath a portcullis, which clangs behind him like the clang of doom, and the elevator slowly ascends. A hospital elevator does not hurry, but it is as purposeful as a fat man boarding a car.

At this stage my neuralgia of the stomach was much better; indeed, it had quite vanished, and I felt very well and strong again. An operation seemed superfluous this time; but the elevator man was callous, and claimed that he lacked authority in such a matter. Landed, we (I am employing here the editorial pronoun) went rolling, toes and face beseechingly up, down a long corridor, hastening toward the inevitable.

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Important as that stomach was to us, the nurses encountered all looked bored, and a supercilious whisper pervaded the corridor atmosphere: "Who's that?" "Oh, just another appendicitis case." "Heigh-hum." Whereupon the stomach tuned up again, as any self-respecting stomach should. We felt just as serious as possible, and invoked a deathlike pallor.

The succeeding preparations were both ominous and interesting. The feat, alone, of disrobing, acrobatically, without leaving one's back, and the donning (assisted by the remarkably calm and mandatory nurse) of the hospital gown, or shirt, or shirtee, is an act appalling.

When the doctor strolled in I explained to him the exact circumstances which had developed: that the neuralgia of the stomach had ceased, that the — er, slight tenderness in section, township and range heretofore described had (Ouch!) disappeared, that I had had a nice ride down, that folks were very kind to me and that I was ready to go home.

He smiled indulgently, and made me say

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“Ouch!” again; and having toyed with my wrist and glanced at my tongue, strolled out. I stood about as much show as a man in the dentist’s chair, with his lower jaw weighted open, and a gag between his teeth, and a rubber dam and a suction pump in. They had shirteed me with the intention of cutting something out; otherwise I had gained admittance under false pretenses.

When not frightened half to death my branch of the Smith family is game; and unresisting, like a lamb being conducted slaughterward, I permitted two porters to wrap me again in blankets. This was welcome as at least covering the shirtee.

Arrived thus, *in suspenso*, while one is en route through a monitory atmosphere of bustle and ether, the vista of white ceiling and white walls is agreeably interrupted by perhaps a passing view into a side room where a line of hairy-armed humans — or inhumans — in extreme negligée are scrubbing themselves over a row of stationary laundry tubs. These are surgeons, before and after. Scoffers at appendicitis usually are treated to this spectacle; I was.

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The vision vanishes, for now we (editorial we again) are halted, half turned, and skillfully wheeled backward, crablike, into a small white compartment where hover white forms, male and female, cowled as monks and nuns, mingling the angelic with the demoniacal.

They are going to chloroform us! The crucial moment is in perigee. At this juncture it is quite proper that we outwardly remain bold and stoical, but that tumultuous thoughts surge through our brain. There are many dogs and cats, in trunks and washboilers, to recall distinctly. Arise their doleful yelps and yowls. Never again will we chloroform a supplicating, defenseless animal.

The nurses are binding closer the blankets, and are pinning the folds across arms and legs.

"So you won't strike or kick," they explain, pleasantly.

Extraordinarily jocular and light-hearted are these nurses, for attendants in a place of torment. Possibly they do not realize that we are of much concern in this mun-

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dane sphere; that when we are cut into, the Lady-Who-Married-Us also is cut into, that various other Smiths are cut into, that certain business deals are cut into, that perhaps a future Congress, if not a future Presidential chair, is cut into. It may be only an appendix operation, but it is nevertheless, in this case, a serious and solemn matter.

“So you won’t strike or kick,” they said, did they? This brings up a hideous suspicion. When people are under an anæsthetic they are not responsible. The question with you is, not what you will *do* (you don’t care whom you swat), but what you will *say*. Of course, everything you ever have heard or read of chloroforming and etherizing must needs flood your mind, and particularly the assertion that the patient is liable to reveal that traitorous subconsciousness lurking ready for just such an occasion. Gentle women have been known to babble shockingly, and the levee tough has been known to pray. How are *you* going to break out? Are you a dual personality, the worse half of which is about

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to ramp around hideously and satyr-like? Jiminy! And will you ever know? Will the Lady-Who-Married-You ever know?

"Fine heart action. You're all right," declares the anæsthetist, bluffly, tucking away his stethoscope thing, and sitting behind the top of your head.

There is anointing, for the sacrifice, of nostrils and chin.

"So you won't be burned," explains the accommodating nurse.

Another stations herself by, upon a stool, watch in hand and cool fingers upon your wrist. These attentions are touching—and, since the operation is for only appendicitis, not at all reassuring. While you would not voice the thought, you wish that the Lady-Who-Married-You were near, to hold your hand and to receive your last word and testament.

It is rather pathetic, this scene: a once strong man bound fast upon the flat, hard white pallet in a secret chamber, with appendicitis ravaging his vitals and these hooded, ku-klux figures besetting him to work their will.

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But you are about to be launched; for a strip of cloth laid across veils those brave eyes of yours, and a pungent odor assails those quivering nostrils.

"*He* does n't care. *He's* not nervous," praises a voice afar.

"N-no, n-not a b-bit," you affirm, through cold sweat, and smiling ghastly out from your mask of cloth.

You wish that you had been a better man; that is all.

Surgeons used to do their own anæsthetizing (being hospital educated I can talk that word just as fluently as I write it) and jammed the stuff down your exhaust with a rudeness irritating to a sensitive organization. To chew on a bullet was much preferable, or to be hit with a club. What with keeping the chloroform lid on, holding the leg with one hand and cutting it off with the other, the old-time surgeon had many a busy hour and few moments to devote to polite amenities.

But to-day the details of an operation are fully differentiated. One man dopes, another handles the knife, another the fork,

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another the spoon. The anæsthetist having his own separate fee to earn, goes to work as if aware of the fact and its responsibilities. My anæsthetist (it is great to be empowered thus to add to your property list a surgeon or two, an anæsthetist, a hospital, and a nurse) *my* anæsthetist was a kind of dilettante. He took a real æsthetic pleasure in the delicacies of his art. His fingers seemed to play in a spiritualistic fashion about my mustache, there was a wafty sensation across the mouth and nostrils, and a sweetish odor which he apologetically removed whenever I was getting used to it.

This sort of entertainment, as protracted and as leisurely courteous as bargain day in an Oriental bazar, continued apparently for some time; and lying there comfortably upon the pallet, with eyes closed, the anæsthetist breathing upon my brow and femininity holding my wrist, I began to wax sleepy; for it had been a fatiguing day. However, 't would never do to drop off to sleep; the surgeons might then start in under a misapprehension. Ugh! Fancy the mutual astonishment.

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So I had better go upon record.

"Does n't seem to have any effect," I mumble. "What's the matter?"

"Oh, no hurry," soothes my anæsthetist. "We'll take our time. They (I knew who *they* were) are n't ready yet, anyway."

Silence. Continued spiritualistic fingerings and waftings.

"Don't let them begin cutting too soon." I have since learned that this injunction by the patient was not original with me. They all say it.

My anæsthetist assures that he won't.

More silence, and manipulations as before mentioned.

This is pleasant, being chloroformed — if only the chloroform would take effect. Evidently you are a hard subject to put under. You hope that they are interpreting the difficulty. Perhaps they are, for they seem to be working more persistently, and the wafty odors are somewhat increased. But all that is accomplished is to make your ears buzz, interfering with the point of the funny story which your anæsthetist is now telling to the nurses.

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"Sheel fleepy," you warn. "Not chlor'-form, though. Jus' tired."

"All right," responds your anæsthetist. "No hurry."

The little room is very quiet. Without, in the corridors, is careless laughter, patter of busy feet; but within, a small silent circle is gravely watching that wondrous and merciful transformation of a quick and sentient being into a living corpse.

"Shleep minute. Wait-bit. Notready."

The buzzing is annoying; it gives a dizzy sensation. Aside from that, your eyes and tongue together are deliciously heavy, and you simply have *got* to take a little nap.

"G'by. Don't-start. Canfeelyet."

You will have to depend upon the other persons in the room to keep the surgeons away while you are helplessly dozing. They will, won't they? Meanwhile, the blackness behind your closed eyes is curiously scintillant with flat sparks; the buzzing of swarming bees in your ears is terrific; and as you gaze and listen, with sudden sickening swoop you have slipped from the pallet and headlong plunge down, down,

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down through midnight space. Struggling, pawing, fighting for a way, you rise out of the depths of the Icarian dive, and break the surface. Like butterflies the white caps and sweet faces of nurses flutter above you. Your eyes refuse to focus and wearily you must close them. What's the matter — what has happened — where are you, and why? Why is a mouse? You stammer with thick utterance, appealing generally.

“Where 'm I?”

“In your room.”

This is to be digested a moment. Then abruptly a poignant alarm assails. The question quavers weakly, fearfully.

“But they have n't done it yet?”

“Oh, yes.” The nurse's voice tinkles seraphic. “It's all over with.”

Thank God! And you're alive. The Lady-Who-Married-You must be so informed at once.

“What time is it?”

“Eleven o'clock.”

Jee-rusalem! Four hours obliterated — wiped off the mental map, leaving trace of not even a dream! Impossible! Or is this

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itself but a dream? You would like to explore that spot, to see if the news is really true; but you dare not, lest you wake yourself up in the midst of the operation. And as you again open your mouth, in sickly, babyish fashion, the ministering angel in white cap deftly inserts an ambrosial swab — icy cold, wet, and grateful as a drop of water to a Dives. When you shut down upon it as feverishly as a starving kitten, she says: "Don't do that. Don't swallow any. It will make you sick." This diverts you.

Now, if one might stop right here, appendicitis surgically treated might justly be compared to the eradication of a wart; and scoffers would be right in proclaiming: "Aw, there's nothing to it." No, and there's nothing to jumping off the Brooklyn Bridge until you're in the water.

A surgeon proffered a statement for \$1000 to a parent — or maybe a husband; more likely a husband. And the husband kicked, demanding an itemized account. This promptly came.

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For operating \$ 1

For knowing how 999

So in appendicitis the patient's account should read:

Operation Nothing doing

Getting over it Wow

That mingled chloroform and ether, so unobtrusive and benevolent in its entrance, during your unconsciousness has turned into a viper in your bosom and makes exit with a sting in its tail. Seems to me that I have read of vipers with horny, sting-y tails; but rather than be accused of nature-faking I will compromise on scorpions. A scorpion, then. Some victims must acknowledge the sting with a series of howls like those of a Comanche Indian or of a mad wolf; others are palely stoical; a few are immune — and the nurse praises:

“You came out beautifully. Just as if you were waking up.”

The lightest phase of this “waking up” is about as exhilarating as the morning after the celebration of New Year's resolutions.

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Here it is necessary to wax personal again, for this is to be a human document, and the honest confession of a reformed scoffer.

Awakening, I found much to occupy me immediately. I must not swallow that delicious swab; I must ascertain whether the nurse was solitary or in triplicate; and I reeked of ether at every pore — tasting only ether with a tongue which felt like a freshly painted shingle. Presently I discovered that my bed was “up by the head” to the height of two saw-horses, and that I was snugly ensconced in a colicky attitude on my spine, knees well aloft and held there by a trapeze run through under them. Pillows wedged against the soles of my feet nicely perfected the posture — it being “Fowler’s position.” Dr. Fowler himself died from appendicitis — but they don’t tell the patient this until he is well. If he doesn’t get well he finds out for himself, no doubt.

From some part of my anatomy a long rubber tube connected with an elevated glass tank six or twenty feet distant (space

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being still an uncertain quantity); and between times I studied this, wondering whether I was going out or coming in.

Now anybody who insists that appendicitis amounts to "nothing," and that Nature is going to sit calmly by, knitting, while an alien force rips through a layer of hide and three or four layers of muscles, and invades a sanctum sanctorum maintained under a strict Monroe Doctrine through ten, twenty, thirty, forty years, is an ass. This, my deluded sir and madam, is an ABDOMINAL OPERATION — and a score of years ago the surgeon who got into the human abdomen and out again without leaving an abscess or a pair of forceps, was deemed not so much skillful as lucky. To-day the abdomen is no longer sacred, and is far better known than the interior of Thibet. But Nature continues to protest.

To cough is *hara-kiri*; to sneeze is perforation by a red-hot poker; to respond to nausea is longitudinal suspension between opposing wild horses.

"Try to sleep," implores the nurse.

I try. There is nothing that I would not

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do for that nurse, lest she leave me abandoned to my fate. I don't marvel that patients usually would like to marry their nurse, so as to keep her handy. I close my eyes, and am just floating away—I don't care where—when below there, inside, some imp (Boots, the house-boy, or other mischievous wight) darts from covert and gives the wound a violent twitch.

"I wonder what that's for," he pipes.
"Never saw *that* before."

With an electric jump I am wide awake. This amusing game continues indefinitely. Every time I drift off (turn my back, so to speak), that indefatigable scalawag slyly jangles the doorbell.

The painted tongue persists. There never was such a tongue, never. The paint is dry now, and feels more like tar and feathers.

"Can't I have a drink?"

"Yes, I'll give you a drink." And so she does—a teaspoonful of hot water, which I am instructed to swallow slowly.

It has about as much effect on that tarred and feathered tongue as a drop of dew on a hip rubber boot.

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This is a new occupation: waiting for that teaspoonful of hot water, which arrives every half hour. One's thoughts dwell upon it, and one listens eagerly for the nurse's step, returning; one's mouth opens, in advance, like a nestling birdie's. To such a plane is reduced a once strong mind.

In the midst of this humiliating pastime the Lady-Who-Married-Me enters timidly, half-smilingly, half-tearfully.

"Dearest!" she says. "How are you?"

"Fine," I say. "Listen. Come closer. Let us sing, 'Little Drops of Water.'"

The nurse makes her withdraw; and she goes, blanched because she deems me crazed by my experiences of the past ten hours.

The dose is doubled, to two teaspoonfuls at a time. Nevertheless, despite this generosity in water-rights, the waking dreams of a human being dying on the Death Valley desert obsess the brain. I see again the Mississippi River of boyhood (and anyway no other river would have sufficed); as it ripples by raft and sandbar I take repeated headers into its wet, luscious depths. I stand out on the lawn, at home, and let the

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Lady-Who-Married-Me drench me with the hose. Some confounded idiot is at the very moment sprinkling the grass outside the hospital window—I can hear the nozzle fizzing. I recall a spring, by a roadside, and a battered tin can upside down on a stick, at its verge, ready for the next thirsty comer. I would trade Rockefeller's millions for a draught out of that old can. But particularly I dwell lovingly upon a series of barrels which used to stand in the shady corners of the runways among the lumber piles of the mill-yards back by that same Mississippi. These barrels were dark and cool and dripping with their contents of bran and water and chunks of ice. A tin dipper lay upon the cover of each barrel. The bran was supposed to render the drink innocuous of sunstroke or stomachache, no matter how hot you were; and when we boys trailed through, burned and perspiring and thirsty, to and from swimming and fishing, we halted at every barrel and gulped recklessly the milky mixture. There was plenty for all—for boys and for mill-hands. Shooting the chutes

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upon my spine in the boat bed (and never arriving), knees elevated over the trapeze, feet securely tucked against the pillows below, head bolstered upon the pillows above, back between curved like a contorted currant worm pierced in amidships, mouth tasting now of sawdust and straw, again and again I sent my astral frame to those barrels adown the piny, shady-cornered runways — but remained behind myself, and accepted dole of two hot teaspoonfuls administered each half-hour; remained behind, upon that confounded bed and played birdie.

But this succession of outrages as related were but preliminaries to the big show. I had yet scarcely been conscious of the wound, save when the scullion imp had rung the doorbell to call my attention. The fact is, I believe, that a surgical incision, although long and deep, when clean and sewed and tightly bandaged is pretty hard to locate by the patient in bed, who has not seen it. The pain has a trick of transferring itself along the nerves and sounding at a distant station. So *my* surgeon, when he

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had *his* appendix removed, suffered not so much in the abdomen as in the right thigh from hip almost to knee; and I did n't care a rap, in general, for the hole in my lower right angle, but my back and middle front protested violently as if *they* had been cut into. There also was an aggravating lump in my thorax region, like a chestnut burr lodged there, which the doctor said was "a sympathetic irritation from a little intestinal disturbance." 'T was mistaken sympathy, then. I tried for days to swallow that lump, but I budged it no more than a chicken budges a grain of corn attached to a thread.

The Lady-Who-Married-You comes in, and you are glad to see her, although considerably preoccupied. The tarred and feathered tongue still wears the shameful livery; the lump in the thorax is still anchored fast; the three (three, now!) teaspoonfuls of hot water half-hourly must be anxiously anticipated.

Until this recent diversion of appendicitis and resultant operation I never realized what an automatic, willing household

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the human body is; each member willing, even eager, to rush into a breach and help out some other member. Too willing at times. So I found the muscles of the abdomen arching up, with a do-or-die intensity, to protect the wounded tissue and give it a chance to recover, just as though the surgeon's dressings were not placed there and bound tight for exactly that purpose.

'T was no use trying to relax those foolish muscles. I might as well talk to the wind. They arched so zealously that they drew the back up with them; and soon the back, caring little for what was happening to the abdomen, grew tired of being dragged into the business.

Of all the little annoyances which, *sub rosa*, assail one who is popularly presumed to be taking a vacation with appendicitis, this backache is the most persistently worse—and I employ the phrase advisedly, in defiance of grammarians. Anybody who has been through an operation for appendicitis is entitled to privileges.

You can't turn over upon your right side, for you have about eight inches of dressing

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there and that is driven against the wound like a football. You can't turn upon your left side, because that hurts the right side. Moreover, neither position eases the ache and you are forbidden to turn, anyway. So there you are. All the time those zealous, perspiring abdominal muscles are working like Trojans, each trying to be an Atlas upholding a world. And the back waxes weaker and weaker, tired and tired, but is as helpless as any weeping small boy in tow of a shopping mother.

So far little has been said of the wound; I do not mean to omit it. If you had a "bad" appendix, with danger of infection, through an extra hole termed the "stab wound" (gory term) a strip of gauze probably has been tucked in, to the place where the appendix used to be, for drainage; and in about sixty hours it must be extracted. It is six or nine inches long, and has frozen fast all the way down, with a final grip on the backbone. The surgeon hauls it out by quarter-inches; each quarter-inch feels like a block of houses, uneven in height. Since that experience I have sincerely pitied a

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ship with the anchor chain whizzing through her hawse-hole.

For *I* had that "bad" appendix; *I* had that infernal plug pulled out by the roots; *I* had every extra on the list save a stomach-pump. *I* had an infection (notwithstanding two surgeons, a medical man, the nurse, some porters, and the Lady-Who-Married-me), dropped off, thoughtfully, by that dratted appendix en route to the bottle. But invited to the surface by boiling water delicately dribbled upon the stitch-line from the height of one foot every two hours all night, and a boiling-water bag bound on fast, between times, that the memory might not cool, the micrococcus horde, or whatever it was, made exit with great precipitancy, leaving a gigantic blister and an orifice through the hide gaping wider than a Hottentot's smile.

I had *that*. *I* also had scissors trimming the gap into charming symmetry; and a knife paring it so the edges should stick; and stitches crisscrossing it to hold those edges together when they might stick — and until a surgeon's needle, shaped like an

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adult bobcat's claw, is jammed through one's living hide one does not appreciate how thick that hide may be on even a thin-skinned person.

So, all in all, I can assert that I am competent to tell about the appendicitis cure, from the standpoint of a layman — such being the paradox.

The surgeon comes once or twice a day to inspect his handiwork. This is an event. First the nurse bustles out and in again, with half a dozen granite-ware pans, some wet, some dry. She arranges these mathematically upon the little table beside the bed, fills the interstices between them with a jar of boric, jar of sterilized gauze, bottle of alcohol, etc., and from the formidable roll of cotton which is your especial property she plucks bolls of the stuff (they tear away with a dry, gritty sound calculated to set one's teeth on edge) and puts them to float in a pan. Then she unpins the girdle which cinches you like any pack-mule, and with unexpected strength of wrist and arm peels off a few yard-strips of adhesive plaster — the process laying bare your very soul.

HOW ARE YOU FEELING NOW?

Now strides in the surgeon, sleeves rolled high, fingers dripping suggestively — a personage of extreme caste, he, who must not touch anything that anybody else has touched, not even a door-knob. The wound is unveiled for his gaze; and squinting down along your prostrateness you may see for yourself the suture (looking, in its stitches, like the lacing of a football) and whether you have drawn the McBurney incision, stylishly on the bias, paralleling the obliquity of the right hip, or one of a different pattern and more in the middle.

The various instruments jingle in their alcohol bath, and you next crane to note which he selects from the pan — crane with the apprehension of the dental chair. It may be scissors, with which he snips only gauze or adhesive; it may be a diabolical probe; it may be forceps with which to jerk out stitches or to pull them tighter; it may be a tiny knife, insignificant as a pocket nail-cleaner, but gaining upon acquaintance. It may be — and let us hope so — nothing.

The surgeon is, as may be inferred, an

A LITTLE FLIER IN APPENDICITIS

important factor in the daily program, but nearer and dearer to you is the nurse. Much entertainment will be found in trying to surprise her into admitting something. This is excellent mental exercise, for a trained nurse must never, if she can avoid, give out information. My nurse (whom I have reason to believe was born a bright, observant girl) was a perfect foil to the art of cross-examination. I never, even in her most unguarded moments when she slumbered upon her cot at the other side of the screen, was able to gather from her such innocent knowledge as: who had died in that next room, and what of; whether somebody had not sometime died in my room; whether I was going to die myself; how soon I was to get up; whether my case was not the worst in her experience; whether anybody else suffered as much as I; what I had said (if anything) when under the anæsthetic; what proportion of appendicitis operations were fatal; who it was that was making such an uproar across the corridor, and whether he had appendicitis; what was that dose she had

HOW ARE YOU FEELING NOW?

given me, and why, etc., all being queries of vital moment. But she never admitted even so much as that I was in the hospital. The isolation was supreme.

And amidst the stomachache and the backache, the leg exercises as you constantly slide down and push up, the experimentation with postures each more uncomfortable than the others, the tarred and feathered tongue, the thirst and the imagining oneself under a railroad water tank with the spout full open, the inspection by the surgeon, the tilts with the ingenuity of the nurse, there are the visits, twice a day, from Her, the Lady-Who-Married-You — angel's visits, too few and far between.

However, the post-appendicitis situation, in acute form, does not last forever. Not quite. Eventually Nature becomes reconciled to doing without what she did n't need. The backache is a matter of only a couple of weeks. First your knees are let down from their trapeze; and in due time the bed is put upon even keel. Some day you are given a long, cold drink. It flows through your alimentary canal like a cloud-

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burst down an Arizona arroyo. Some day you find (tentatively) that you can blow your nose without tying your solar plexus into a hard knot; and soon thereafter you are emboldened into letting go of that sneeze which you have been holding in leash for a week or two.

Yes, life is becoming sweet once more.

And some day, *some day*, pale, wabbly, striped like a zebra with the trail of the adhesive, out you may go; full of cautions and thankfulness, and with a slight list to the right where you are a little chary yet of the calking. Out you go, to awaken to the fact that now when you may drink as much and as often as you please you dream no more pleasant dreams of water tanks, and you let sprinkler carts go by without any desire to follow behind them, down the street. This is a disappointment.

THE END

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